WATER WELL PLUGGING RECORD Form WWC-5P KSA 82a-1212 ID NO.						
1	LOCATION OF WATER WELL:	Fraction	Section Number	Township Number	Range Number	
	County: Clay	NE14 NE14 NW14	36	6		
	Distance and direction from nearest town or city street address of well if located within city? 2½ miles east and 2 miles north of Morganvilk					
	2/2 miles east a	end 2 miles	s north a	of Morgan	ville	
2	WATER WELL OWNER: Bonnie Mellies Global Positioning Systems (decimal degrees, min. of 4 digits					
	Lantude:					
	RR#, St. Address, Box #: 1022 14th St Longitude:					
	City, State ZIP Code: Clay Center KS 67432 Elevation:					
	Data Collection Method:					
3	3 MARK WELL'S LOCATION 4 DEPTH OF WELL 19 ft.					
	WITH AN "X" IN SECTION					
	BOX: WELL'S STATIC WATER LEVEL 9 ft					
	N WELL WAS USED AS:					
	NW NE					
			5 Public Water Supply	9 Dewa		
W	Z Irrigation 6 Oil Field Water Supply 10 Monitoring B Togglet 7 Demostic (Lawn & Condon) 11 Injection Well					
	A Industrial 2 A. Carallella and Carden 11 Injection wen					
	Was a chemical/bacteriological sample submitted to Department? YesNo					
	S					
5 TYPE OF BLANK CASING USED:						
	1 Steel 3 RMP (SR) 5 Wrought 7 Fiberglass 9 Other (Specify below) 2 PVC 4 ABS 6 Asbestos-Cement 8 Concrete Tile					
	Blank casing diameter 60 in. Was casing pulled? Yes No If yes, how much					
	Casing height above or below land surface in.					
6 GROUT PLUG MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other						
	11/2 5					
	Grout Plug Intervals: From 4/2 ft. to 5 ft., From ft. to ft., From to ft.					
	What is the nearest source of possible contamination:					
	1 Septic tank 6 Seepage pit 11 Fuel Storage 16 Other (specify below)					
	2 Sewer lines 7 Pit privy 12 Fertilizer storage					
	3 Watertight sewer lines 8 Sewage lagoon 13 Insecticide storage 4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well?					
	4 Lateral lines 9 Feedyard 14 Abandoned water well Direction from well? 5 Cess pool 10 Livestock pens 15 Oil well/Gas well How many feet?					
		MATERIALS F	ROM TO	PLUGGING MA	TERIALS	
	0, 4/2 Soil					
	4/2 5 Bentoni	te				
	5 9 Clay S	oil				
	9 19 Chibrina	ated Sand				
				74.		
7. CONTRACTORIS OR LANDOWNERDS CERTIFICATION TO STATE OF THE STATE OF						
7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was plugged under my jurisdiction and was completed on (mo/day/year) 04/17/08 and this record is true to the best of my knowledge and belief. Kansas Water						
Well Contractor's License No. This Water Well Record was completed on (mo/day/year) 14/17/08 under the						
	iness name of	b	y (signature	me mol	•	
-	CENTRAL CONTRACTOR OF THE CONT					
INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the						

INSTRUCTIONS: Use typewriter or ballpoint pen. Please press firmly and print clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Geology Section, 1000 SW Jackson St., Ste. 420, Topeka, Kansas 66612-1367. Telephone: 785/296-5522. Send one to Water Well Owner and retain one for your records. Visit us at http://www.kdheks.gov/geo/waterwells.